

K081133

JUN 10 2008



KWANG YANG MOTOR CO., LTD.

No. 35, Wan Hsing Street, San Min Dist., 803, Kaohsiung, Taiwan

TEL: +886-7-3822526 FAX: +886-7-3825834

510(k) Summary

Device

Trade name: **KYMCO ForU EQ40 scooter**

Common name: **Electrical scooter**

Classification name: **Motorized three-wheeled vehicle**

Medical specialty (Panel): **Physical Medicine Device**

Regulation number: **890.3800**

Product Code: **89INI**

Classification: **Class II**

Predicate devices

AVANTICARE SA4022(K051538)/ LERADO CHINA LIMITED

ForU EQ30(K072630)/ KWANG YANG MOTOR CO., LTD.

Intend use of device

KYMCO ForU EQ40 scooter is intended for an indoor/outdoor scooter that provides transportation for disabled or elderly persons limited to a seated position.

Device description:

The **KYMCO ForU EQ40 scooter** is an indoor/outdoor transportation vehicles which is battery operated. The movement of the scooter is controlled by a tiller handle and a **thumb operated potentiometer throttle control lever** to engage and disengage the scooter motion in both the forward and reverse directions.

Substantial equivalence:

The **KYMCO ForU EQ40 scooter** is substantially equivalent to the **AVANTICARE SA4022 (K051538)** and **ForU EQ30(K072630)** manufactured by **LERADO CHINA LIMITED** and **KWANG YANG MOTOR CO., LTD.**, respectively.

There are minor differences in performance specifications of the scooters, these differences do not alter the intended function and use of the device, nor do they raise any new questions pertaining to safety or effectiveness. Therefore, **KWANG YANG MOTOR CO., LTD.** believes that the **KYMCO ForU EQ40 scooter** is substantially equivalent to legally marketed devices currently in commercial distribution.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Kwang Yang Motor Company Limited
% Junnata Chang
14F-2, No.1 Zhuangjing Road
Lane 25
Banqiao,
China (Taiwan) 220

JUN 10 2008

Re: K081133
Trade/Device Name: KYMCO ForU EQ40
Regulation Number: 21 CFR 890.3800
Regulation Name: Motorized three-wheeled vehicle
Regulatory Class: Class II
Product Code: INI
Dated: May 19, 2008
Received: May 19, 2008

Dear Ms. Chang:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at (240) 276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at (240) 276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at toll-free number (800) 638-2041 or (240) 276-3150 or the Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Mark N. Melkerson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Mark N. Melkerson
Director
Division of General, Restorative
and Neurological Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

Indications for Use

510(k) Number (if known): K081133

Device Name: **KYMCO ForU EQ40**

Indications for Use:

To provide mobility to disabled or elderly persons limited to a seated position.

Prescription Use _____

(Part 21 CFR 801 Subpart D)

Over-The-Counter Use X

(Part 21 CFR 807 Subpart C)

AND/OR

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER
PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Neil R. Dyer for mkn
(Division Sign-Off)

**Division of General, Restorative,
and Neurological Devices**

510(k) Number K081133